

WASHINGTON STATE GAMBLING COMMISSION

LOCATION: 4565 7th Avenue SE, Lacey WA 98503 MAILING ADDRESS: P.O. Box 42400, Olympia WA 98504-2400 TELEPHONE: 360-486-3440 / FAX NUMBER: 360-486-3631 TOLL-FREE: 1-800-345-2529 / TDD: 360-486-3637

WEB SITE: www.wsgc.wa.gov

RECREATIONAL GAMING ACTIVITY PERMIT								
	((SUBMIT APPLICATION 14 DAYS PRIOR TO THE EVENT.))							
	Mark ⊠ appropriate box for license type you are applying for:							
	☐ Commercial Stimulant / Profit-Seeking Organization							
	☐ Bona Fide Charitable / Nonprofit Organization Fee: \$ 58							
	* * * ATTENTION * * *							
	fore you complete and submit this application there are three (3) different options to sponsor or conduct a Recreational aming Activity (RGA).							
1.	Your organization <u>may conduct</u> the RGA and use professional gambling equipment obtained from a licensed equipment distributor. <u>You must complete this application prior to conducting the RGA</u> .							
2.	Your organization <u>may sponsor and contract</u> with a licensed equipment distributor and have the distributor conduct the RGA for you. <u>You will NOT need an RGA permit because the distributor is licensed</u> .							
3.	Your organization may conduct the RGA and use non-professional homemade devices. You will NOT need an RGA permit, nor need to notify our agency, but you must notify your local law enforcement agency.							
	you are confused about any of the above options, please call us at our in-state toll-free number 1-800-345-2529 or 50) 486-3440.							
	* * * GENERAL INFORMATION / INSTRUCTIONS * * *							
1.	Please type or print with black ink.							
2.	Complete ALL portions of the application.							
3.	Mail or deliver the completed application and the fee (listed above) to the Washington State Gambling Commission.							
4.	Ensure that the application is signed and dated by the highest-ranking organizational official.							
5.	When completed, recheck the application carefully. Be sure it is complete. This check may help you prevent processing delays.							
	GENERAL INFORMATION							
1.	Applicant:							
	Organization Name / Chapter							
2.	Address:							
	Street / P. O. Box							
	City State Zip County							
3.	Email Address (if available):							
4.	() - () - () Organization's Business Telephone Gambling Activity Premises Telephone Organization's Fax							
5.	Date Organization was Organized:///							
6.	Has your organization been previously licensed by the commission?							
	ACTIVITY INFORMATION							
1.	Date of Activity: NOTE: Date and Time Must be Exact							
	FROM: Date (mm/dd/yy):/ Time (If Noon or Midnight, so State): am pm							

TO: Date (mm/dd/yy): _____ / ____ Time (If Noon or Midnight, so State): _____ am ____ pm

P -	Owner of Premises: Premises Street Address:					
_	Premises Street Address:					
- C						
	City City Limits:	State	Zip	(County	
	Organization / Distributor					
-	City	State	Zip		County	
٧	What was the cost of the lease / rental? \$_					
a Put applic provide P	s application and all supplemental information blic Disclosure Request process. In the excation or the license file established, you ded in RCW 42.56.540. TH OF ORGANIZATIONAL OFFICER along the declare under penalty of perjury, under and complete. I have read and understance the organization listed on this application hatted. I understand that untruthful or mistoling license(s) / permit(s) currently held, are of Washington. I further understand that 230-03-005 and in no other manner.	/ MANAGER OR the laws of the Sta d the Washington A has been in exister sleading answers a hd / or criminal pros at the Recreationa	mission receives a publication, that the Commission receives a publication, that the Commission of Washington, that all Administrative Codes as the for at least six montained cause for denial of secution under the proving Gaming Activity must	c disclosure requision notify you of MANAGER / C If the information in shown on this application, is application, is sions of chapter 9 to be conducted in	CORDINATOR In this application is application. I affirm this application is revocation of any 0.46 of the Revised	
				Date		
APPL	LICATION PREPARED BY:					
	Name			Title		
	Address	City	State	Zip	County	
			,	\		

equipment authorized for use in fund-raising events, conducted no more than two times per calendar year, by, or on behalf of, a sponsoring organization, business, or association, or department of an organization, business, or association.

- (1) An organization, business, or association, or department of an organization, business, or association, that holds or sponsors an RGA must either:
 - (a) Apply for and get a permit before the event; or
- (b) Hire a licensed fund-raising equipment distributor to organize and conduct the activity.
- (2) Only members and guests of the sponsoring organization, business, or association, or department of the sponsoring organization, business, or association, may participate in the RGA.
 - (3) Permit holders must:
 - (a) Rent the gambling equipment used in the RGA from:

- - (b) Use scrip or chips which have no cash value; and
 - (c) Limit the RGA to eight hours.
- (4) The permit holder may charge a fee to enter the premises if that fee pays for:
- (a) An accompanying meal and entertainment associated with the RGA; or
 - (b) The costs of renting the equipment used in the RGA.
- (5) The permit holder may allow participants to redeem their scrip or chips for prizes. All prizes must be donated to, or provided by, the permit holder.